

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>me/</i>		10/18/01
O.I.P.E. CLASSIFIER			10/11-01-01
FORMALITY REVIEW	MM	920	11-14-01
RESPONSE FORMALITY REVIEW	GS	0516330	6-13-03

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 " ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions **BEST AVAILABLE COPY**  
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TC 41920

5/21/95 6/11/03

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